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OLF3 (Official Local Form 3) Effective December 1, 2017

UNITED STATES BANKRUPTCY COURT DISTRICT OF MASSACHUSETTS

In re:	Ronald A. Passalugo Debtor(s)	Case No.: 18-12123 Chapter 13	
	CHAPTER 13 PL	AN.	
	ne. This plan is: Original AMENDED Amended (Identify First, Second, Third, etc.) Postconfirmation (Date Order Confirming Plan Was Entered: s plan was filed: 11/27/18	D Amended (Identify First, Second, Third, etc.) mation (Date Order Confirming Plan Was Entered: filed: 11/27/18 NOTICES	
PART	1: NOTICES		
You shoup provision States Co ("MLBR" TO CRE Your right attorney. of this Plan which the Court "Trustee have received bar date in the Court of the	as may be binding upon you. The provisions of this Plan are governed by so de (the "Bankruptcy Code"), the Federal Rules of Bankruptcy Procedure "), and, in particular, the Chapter 13 rules set forth in Appendix 1 of MLE EDITORS: In this may be affected by this Plan. Your claim may be reduced, modified, or any out on the an attorney, you may wish to consult with one. If you can, you or your attorney must file with the Court an objection to confirm the torders otherwise. A copy of your objection must be served on the Debton "). The Bankruptcy Court may confirm this Plan if no objection to confirm the torders of the any of Chapter 13 Bankruptcy Case from the Barfor filing a Proof of Claim. To receive a distribution, you must file a Professional Profe	statutes and rules of procedure, including ("Fed. R. Bankr. P."), the Massachusetts BR, all of which you should consult. It eliminated. Read this Plan carefully and oppose this Plan's treatment of your claim ation on or before the later of (i) thirty (30 ty (30) days after service of an amended or (s), the attorney for the Debtor(s), and the nation is filed or if it overrules an objection and the coof of Claim. The manner required under the Bankruptcy ayments not later than the earlier of (i) thirmust check a box on each line below to stion "Not Included," if you check both be	Title 11 of the United Local Bankruptcy Rules discuss it with your or any other provision days after the date on or modified Plan, unless that the confirmation. You eadlines, including the confirmation of Code, the Fed. R. Bankruty (30) days after the state whether or not this oxes, or if you do not
1.1	A limit on the amount of a secured claim, set out in Part 3.B.1, whicl partial payment or no payment at all to the secured creditor.	h may result in a Included	✓ Not Included
1.2	Avoidance of a judicial lien or nonpossessory, nonpurchase-money s set out in Part 3.B(3).	ecurity interest,	✓ Not Included
1.3	Nonstandard provisions, set out in Part 8.	✓ Included	Not Included
DADT		DA VIMENTEC	
PART		PAYMENIS	
Α.	LENGTH OF PLAN:		
✓	36 Months. 11 U.S.C. § 1325(b)(4)(A)(i); 60 Months. 11 U.S.C. § 1325(b)(4)(A)(ii);		
	Months. 11 U.S.C. § 1322(d)(2). The Debtor(s) states the following cau	ise:	
В.	PROPOSED MONTHLY PAYMENTS:		
Monthl	y Payment Amount Numb	er of Months	

56

\$85.00

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\$104.00		4	
C.	ADDITIONAL PAYMENTS:		
Check o			
	None. If "None" is checked	ed, the rest of Part 2.C need not be completed of	and may be deleted from this Plan.
		None. If "None" is checked, the rest of Part 2.C need not be completed and may be deleted from this Plan. Int of Payments to the Trustee [B+C]: Int of Payments to the Trustee [B+C]: Int be sufficient to pay the total cost of this Plan in Exhibit 1, Line h. SECURED CLAIMS None. If "None" is checked, the rest of Part 3 need not be completed and may be deleted from this Plan. E OF DEFAULT AND MAINTENANCE OF PAYMENTS: If "None" is checked, the rest of Part 3.A need not be completed and may be deleted from this Plan. DIFICATION OF SECURED CLAIMS: If "None" is checked, the rest of Part 3.B need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: If "None" is checked, the rest of Part 3.C need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: If "None" is checked, the rest of Part 3.C need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: If "None" is checked, the rest of Part 3.C need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: If "None" is checked, the rest of Part 3.C need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: If "None" is checked, the rest of Part 3.C need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: If "None" is checked, the rest of Part 3.C need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: If "None" is checked, the rest of Part 3.C need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: If "None" is checked, the rest of Part 3.C need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: If "None" is checked, the rest of Part 3.C need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: If "None" is checked, the rest of Part 3.C need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: If "None" is checked, the rest of Part 3.C need not be completed and may be deleted from this Plan. RENDER OF COLLATERAL: I	
PAR	T 3:	SECURED CLAIMS	
	None. If "None" is checked	ed, the rest of Part 3 need not be completed an	d may be deleted from this Plan.
A.	CURE OF DEFAULT AND MAI	NTENANCE OF PAYMENTS:	
Check (one.		
√	None. If "None" is checked, the res	st of Part 3.A need not be completed and may b	oe deleted from this Plan.
В.	MODIFICATION OF SECURED	CLAIMS:	
Check o	one.		
✓			
C.	SURRENDER OF COLLATERA	<u>L:</u>	
Check o	one.		
□	The Debtor(s) elects to surrender requests that, upon confirmation stay under 11 U.S.C. § 1301 be ter	to each creditor listed below the collateral to f this Plan, the stay under 11 U.S.C. § 3620 minated in all respects. Any allowed unsecu	hat secures the creditor's claim. The Debtor(s) a) be terminated as to the collateral only and that the
	of Creditor		
Barns	stable County Community Septic	Septic/Betterment Lien	02668 Barnstable County Principal Residence. Declaration of Homestead recorded 8/28/96: Book:
Wells	s Fargo Bank	2nd Mortgage/HELOC	02668 Barnstable County Principal Residence. Declaration of Homestead recorded 8/28/96: Book:
Wells	s Fargo Bank	Mortgage Installment Loan	02668 Barnstable County Principal Residence. Declaration of Homestead recorded 8/28/96: Book:
PAR'	Т 4:	PRIORITY CLAIMS	
Check o			
		st of Part 4 need not he completed and may be	deleted from this Plan.
✓	-		
₩.			

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A.	DOMESTIC SUPPORT OBLIGATI	ONS:	
Name	of Creditor	Description of Claim	Amount of Claim
-NONE		X	
-			
В.	OTHER PRIORITY CLAIMS (Exce		
	of Creditor	Description of Claim	Amount of Claim
Intern	al Revenue Service	Tax Liability	\$4,491.27
C.	ADMINISTRATIVE EXPENSES:	of Priority Claim(s) (except Administrative	Expenses) to be paid through this Plan: \$4,491.27
	(1) ATTORNEY'S FEES:		
	of Attorney		Attorney's Fees
-NONE	i-		
such tin	ne as the Court approves a fee application	in MLBR, Appendix 1, Rule 13-7, the Trustee at If no fee application is approved, any plan pay to other creditors up to a 100% dividend.	may not pay any amount exceeding that sum until ments allocated to attorney's fees in excess of
	_		
-NONE	<u>-</u>		
Total A	dministrative Expenses (excluding the	Trustee's Commission) to be paid through the	his Plan [(1) + (2)]: \$ <u>0.00</u>
	(3) TRUSTEE'S COMMISSION:		
The Del	otor shall pay the Trustee's commission a	s calculated in Exhibit 1.	
(h) utiliz paymen	zes a 10% Trustee's commission. In the e	vent the Trustee's commission is less than 10%, m(s), and administrative expense(s) as provided	on of the Plan payment set forth in Exhibit 1, Line the additional funds collected by the Trustee, after 1 for in this Plan, shall be disbursed to nonpriority
PART	75:	NON PRIORITY UNSECURED	CLAIMS
Check o			
<u></u> ✓	None. If "None" is checked, the rest of		ted from this Plan. Will be paid as stated below. Only a creditor
	estimates will provide a dividend o		o rata share of \$_127.31_, which the Debtor(s) _% of its allowed claim.
Α.	GENERAL UNSECURED CLAIMS	<u>:</u>	\$ <u>127.31</u>
В.	UNSECURED OR UNDERSECURE	ED CLAIMS AFTER MODIFICATION IN E	PART 3.B OR 3.C:

Name of Creditor Description of Claim -NONE-

NONDISCHARGEABLE UNSECURED CLAIMS (e.g., student loans):

Amount of Claim

C.

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			Do	cument Page	e 4 of 10	,	
Name of Cr	reditor		Descript	ion of Claim		Amount of Cl	aim
None	A IME A DICINA	C EDOM DE IEO	TON OF	EVECUTODY CONT	DACTE OD I I	E A CIEC.	
		5 FROM REJECT	1	EXECUTORY CONT	KAC 18 OK LI		
Name of Cr	reditor		Descript	ion of Claim		Amount of Cl	aim
		ID TO MONDRIO	D 1777 1 11			NII WILL DI AN	
Th				NSECURED CREDIT ditor(s) is not less than			v: idation Analysis set forth in
					Total Nonprior	rity unsecured (Claims $[A + B + C + D]$: \$127.31
	Enter Fixed A	Amount (Pot Plan)	r multiply	total nonpriority unsec	ured claim(s) by	Fixed Percentag	ge and enter that amount: \$127.31
F. <u>SE</u>	PARATELY CI	ASSIFIED UNSE	CURED	CLAIMS (e.g., co-borr	ower):		
Name of Cr	reditor	Description of Cla	aim	Amount of Claim	Treatmen	t of Claim	Basis for Separate Classification
-NONE-							
				Total of separately cl	assified unsecu	red claim(s) to	be paid through this Plan: \$ <u>0.0</u> 0
PART 6:		EXECU	JTORY	CONTRACTS AN	D UNEXPIR	ED LEASES	
Check one.							
✓ No	one. If "None" is	checked, the rest of	Part 6 ne	ed not be completed and	l may be deleted	from this Plan.	
PART 7:		POSTCON	FIRMA	TION VESTING O	F PROPERT	Y OF THE F	STATE
If the Debtor discharge, pr		charge, property of te will vest upon the	the estate	will vest in the Debtor(s) upon entry of	the discharge. If	the Debtor(s) does not receive a l Report and Account and the
PART 8:			NON	STANDARD PLA	N PROVISIO	ONS	
for Low	nis Plan includes Ith below in a sep- cal Form 3, or where e extent the provis	the following nons arately numbered so hich deviates from (tandard j entence or Official Lo nconsisten	paragraph. A nonstand cal Form 3. Nonstanda	R. Bankr. P. 30 lard provision is cd provisions set	15(c), each nons s a provision not t forth elsewhere	tandard provision must be set otherwise included in Official in this Plan are ineffective. To urt 8 shall control if the box
		s are effective only mplete a short s		"Included" in Part 1, 2 Wells Fargo	Line 1.3 is chec	ked.	
PART 9:				SIGNATURES			
By signing the below.	nis document, Del	otor(s) acknowledge	es reviewi	ng and understanding th	e provisions of	this Plan and the	Exhibits filed as identified
	this Plan are idea						hat the wording and order of the clow, other than any Nonstandard
/s/ Ro	nald A. Passalı	ıgo		No	vember 27, 20	18	
					,		Page 4 of 8

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Ronald A. Passalugo	Date
Debtor	
Debtor	Date
/s/ Peter M. Daigle Date	November 27, 2018
Signature of attorney for Debtor(s)	
Peter M. Daigle	
640517 MA Daigle Law Office	
1550 Falmouth Road	
Suite 10	
Centerville, MA 02632	
(508) 771-7444	
omdaigleesq@yahoo.com	
he following Exhibits are filed with this Plan:	
Exhibit 1: Calculation of Plan Payment*	
Exhibit 2: Liquidation Analysis*	
Exhibit 3: Table for Lien Avoidance under 11 U.S.C. § 522(f)**	
Exhibit 4: [Proposed] Order Avoiding Lien Impairing Exemption**	
List additional exhibits if applicable.	

Total number of Plan pages, included Exhibits: 8

^{*}Denotes a required Exhibit in every plan
**Denotes a required Exhibit if the box "Included" is checked in Part 1, Line 1.2.

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EXHIBIT 1

CALCULATION OF PLAN PAYMENT

b) Priority claims (Part 4.A and Part 4.B Total): c) Administrative expenses (Part 4.C.1 and 4.C.2 Total): d) Nonpriority unsecured claims (Part 5.E Total): e) Separately classified unsecured claims (Part 5.F Total): f) Executory contract/lease arrears claims (Part 6 Total): g) Total of (a) + (b) + (c) + (d) + (e) + (f): \$4,49			
c) Administrative expenses (Part 4.C.1 and 4.C.2 Total): d) Nonpriority unsecured claims (Part 5.E Total): e) Separately classified unsecured claims (Part 5.F Total): f) Executory contract/lease arrears claims (Part 6 Total): g) Total of (a) + (b) + (c) + (d) + (e) + (f): h) Divide (g) by .90 for total Cost of Plan including the Trustee's fee: i) Divide (h), Cost of Plan, by term of Plan, _ months:	a)	Secured claims (Part 3.A and Part 3.B.1-3 Total):	\$0.00
d) Nonpriority unsecured claims (Part 5.E Total): e) Separately classified unsecured claims (Part 5.F Total): f) Executory contract/lease arrears claims (Part 6 Total): g) Total of (a) + (b) + (c) + (d) + (e) + (f): h) Divide (g) by .90 for total Cost of Plan including the Trustee's fee: i) Divide (h), Cost of Plan, by term of Plan, _ months:	b)	Priority claims (Part 4.A and Part 4.B Total):	\$4,491.27
e) Separately classified unsecured claims (Part 5.F Total): f) Executory contract/lease arrears claims (Part 6 Total): g) Total of (a) + (b) + (c) + (d) + (e) + (f): h) Divide (g) by .90 for total Cost of Plan including the Trustee's fee: j) Divide (h), Cost of Plan, by term of Plan, _ months:	c)	Administrative expenses (Part 4.C.1 and 4.C.2 Total):	\$0.00
f) Executory contract/lease arrears claims (Part 6 Total): g) Total of (a) + (b) + (c) + (d) + (e) + (f): h) Divide (g) by .90 for total Cost of Plan including the Trustee's fee: i) Divide (h), Cost of Plan, by term of Plan, _ months:	d)	Nonpriority unsecured claims (Part 5.E Total):	\$127.31
g) Total of (a) + (b) + (c) + (d) + (e) + (f): h) Divide (g) by .90 for total Cost of Plan including the Trustee's fee: i) Divide (h), Cost of Plan, by term of Plan, _ months:	e)	Separately classified unsecured claims (Part 5.F Total):	\$0.00
h) Divide (g) by .90 for total Cost of Plan including the Trustee's fee: i) Divide (h), Cost of Plan, by term of Plan, _ months:	f)	Executory contract/lease arrears claims (Part 6 Total):	\$0.00
i) Divide (h), Cost of Plan, by term of Plan, _ months:	g)	Total of $(a) + (b) + (c) + (d) + (e) + (f)$:	\$4,618.58
	h)	Divide (g) by .90 for total Cost of Plan including the Trustee's fee:	\$5,176.00
j) Round up to the nearest dollar amount for Plan payment:	i)	Divide (h), Cost of Plan, by term of Plan, _ months:	
	j)	Round up to the nearest dollar amount for Plan payment:	

If this is either an amended Plan and the Plan payment has changed, or if this is a postconfirmation amended Plan, complete(a) through (h) only and the following:

k)	Enter total amount of payments the Debtor(s) has paid to the Trustee:	\$416
1)	Subtract line (k) from line (h) and enter amount here:	\$4,760.00
m)	Divide line (l) by the number of months remaining (56 months):	\$85.00
n)	Round up to the nearest dollar amount for amended Plan payment:	85.00

Date the amended Plan payment shall begin: 11/01/2018

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EXHIBIT 2

LIQUIDATION ANALYSIS

A. REAL PROPERTY

Address	Value	Lien	Exemption
(Sch. A/B, Part 1)	(Sch. A/B, Part 1)	(Sch. D, Part 1)	(Sch. C)
35 Ironside Drive West	503,300.00	544,549.95	0.00
Barnstable, MA 02668			
Barnstable County			
Principal Residence.			
Declaration of Homestead			
recorded 8/28/96: Book: 9574,			
Page: 276.			

Total Value of Real Property (Sch. A/B, line 55):	\$ 503,300.00
Total Net Equity for Real Property (Value Less Liens):	\$ 0.00
Less Total Exemptions for Real Property (Sch. C):	\$ 0.00
Amount Real Property Available in Chapter 7:	\$ 0.00

B. MOTOR VEHICLES

Make, Model and Year	Value	Lien	Exemption
(Sch. A/B, Part 2)	(Sch. A/B, Part 2)	(Sch. D, Part 1)	(Sch. C)
2006 Toyota Tacoma 215000	3,684.00	0.00	3,684.00
miles			
Location: 35 Ironside Drive,			
West Barnstable MA 02668			

Total Value of Motor Vehicles (Sch. A/B, line 55):	\$ 3,684.00
Total Net Equity for Motor Vehicles (Value Less Liens):	\$ 3,684.00
Less Total Exemptions for Motor Vehicles (Sch. C):	\$ 3,684.00
Amount Motor Vehicle Available in Chapter 7:	\$ 0.00

C. ALL OTHER ASSETS (Sch. A/B Part 2, no. 4; Part 3 through Part 7. Itemize.)

Asset	Value	Lien	Exemption
		(Sch. D, Part 1)	(Sch. C)
Household Goods	2,500.00	0.00	2,500.00
Misc. Clothing	500.00	0.00	500.00
Misc. Jewelry/Wedding Band	500.00	0.00	500.00
Personal Checking Account: Members Plus Credit Union (0200)	150.63	0.00	75.32
Personal Checking Account: Members Plus Credit Union (0205)	3,377.09	0.00	1,688.55
Personal Checking Account: Members Plus Credit Union (0240)	19,983.81	0.00	3,236.13
401(k): T. Rowe Price	308,722.98	0.00	308,722.98
Met Life - Term Life Insurance Policy (through employer)	0.00	0.00	0.00

Total Value of All Other Assets:	\$ 335,734.51
Total Net Equity for All Other Assets (Value Less Liens):	\$ 323,978.76
Less Total Exemptions for All Other Assets:	\$ 317,222.98
Amount of All Other Assets Available in Chapter 7:	\$ 6,755.78

D. SUMMARY OF LIQUIDATION ANALYSIS

Amount available in Chapter 7	Amount

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A. Amount Real Property Available in Chapter 7 (Exhibit 2, A)	\$ 0.00
B. Amount Motor Vehicles Available in Chapter 7 (Exhibit 2, B)	\$ 0.00
C. Amount All Other Assets Available in Chapter 7 (Exhibit 2, C)	\$ 6,755.78

TOTAL AVAILABLE IN CHAPTER 7: \$ 6,755.78

E. ADDITIONAL COMMENTS REGARDING LIQUIDATION ANALYSIS:	

OLF3A (Official Local Form 3A)

UNITED STATES BANKRUPTCY COURT DISTRICT OF MASSACHUSETTS

)	
IN RE:)	
RONALD A. PASSALUGO)	Chapter 13
Debtor,)	Case No.: 18-12123
)	

CERTIFICATE OF SERVICE OF CHAPTER 13 PLAN

I/We hereby certify that on November 27, 2018 and in accordance with MLBR, Appendix 1, Rule 13-4(b), I/we served by first class United States mail a copy of this Plan to the on the parties on the attached list.

The Debtor, By His Attorney,

/s/ Peter M. Daigle
Peter M. Daigle, Esquire
BBO # 640517
1550 Falmouth Road, Suite 10
Centerville, MA 02632
(508) 771-7444

Electronic Mail:

Carolyn Bankowski, US Trustee John Fitzgerald, Asst. US Trustee

First Class Mail:

Barnstable County Community Septic

Management Loan Program c/o CSMLP PO Box 427 Barnstable, MA 02630

Internal Revenue Service

PO Box 7346 Philadelphia, PA 19101

Massachusetts Department of Revenue

Bankruptcy Unit P.O. Box 9564 Boston, MA 02114

Orlans PC

PO Box 540540 Waltham, MA 02454

Synchrony Bank

c/o PRA Receivables Management, LLC PO Box 41021 Norfolk, VA 23541

Verizon by American InfoSource as agent

4515 N Santa Fe Ave Oklahoma City, OK 73118

Wells Fargo Bank

Loan Service Credit Dispute San Antonio, TX 78265

Wells Fargo Bank

Attn: Bankruptcy Dept Po Box 6429 Greenville, SC 29606

Wells Fargo Bank, N.A.

Default Document Processing N9286-01Y 1000 Blue Gentian Road Eagan, MN 55121-7700

Wells Fargo Bank, N.A. Default Document Processing

1000 Blue Gentian Road N9286-01Y Eagan, MN 55121-7700